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Intellectual Property Corporation**

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562

FAX: 806-498-6673

e-mail: [winstonhsu@naipo.com](mailto:winstonhsu@naipo.com)

Customer No.: 27765

**Fax To: DUONG, FRANK  
Art Unit: 2616**

**Tel.: (571) 272-3164  
Fax: (571) 273-8300**

**From: Winston Hsu, Registration No. 41,526**

**Serial No.: 10/065,293**

**Attorney Docket No.: IACP0012USA**

**Subject: Response to the Office action mailed on 05/05/2006**

**Total Pages: 10 pages (including cover page)**

**Winston Hsu 07/11/2006**

**IACP0012USA0\_A2\_1**

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PTO/SB/21 (09-04)

Approved for use through 07/31/2000 OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/065,293	
	Filing Date	10/01/2002	
	First Named Inventor	Fu-Zu Lee	
	Art Unit	2616	
	Examiner Name	DUONG, FRANK	
Total Number of Pages in This Submission	9	Attorney Docket Number	IACP0012USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	North America Intellectual Property Corporation	
Signature	<i>Winston Hsu</i>	
Printed name	Winston Hsu	
Date	7/11/2006	Reg No. 41,526

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature	<i>Brenda Lin</i>	
Typed or printed name	Brenda Lin	Date 7/11/2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4810)

# **FEE TRANSMITTAL** **For FY 2005**

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

## **Complete if Known**

Application Number 10/065,293  
Filing Date 10/01/2002  
First Named Inventor Fu-Zu Lee  
Examiner Name DUONG, FRANK  
Art Unit 2816  
Attorney Docket No. IACP0012USA

## **METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: **50-3105** Deposit Account Name: **North America Intellectual Property Corporation**  
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## **FEE CALCULATION**

### **1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### **2. EXCESS CLAIM FEES**

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP =	x	=
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP =	x	=
HP = highest number of independent claims paid for, if greater than 3		

### **3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets** - 100 = **Extra Sheets** / 50 **Number of each additional 50 or fraction thereof** x **Fee (\$)** = **Fees Paid (\$)**

### **4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

## **SUBMITTED BY**

Signature *Winston Hsu* Registration No. 41,526 Telephone 3027291562  
Name (Print/Type) Winston Hsu Date 7/11/2006

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**METHOD OF CHATTING THROUGH A CELLULAR PHONE SYSTEM**

Appl. No. : 10/065,293 Confirmation No. 5717  
Applicant : Fu-Zu Lee,  
Dai-Shui Ho,  
Shih-Kuang Tsai  
Filed : October 1, 2002  
TC/A.U. : 2616  
Examiner : DUONG, FRANK  
Docket No. : IACP0012USA0  
Customer No. : 27765

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

Sir:

- 5 In response to the Office action of May 05, 2006, please amend the above-identified application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.

- 10 **Remarks/Arguments** begin on page 5 of this paper.

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